AMENDMENT NO. 3

This Amendment modifies Contract No.12-53-448, for Medical Grade Gases – Helium, Hydrogen, Nitrogen & Zero Grade Air by and between the County of Cook, Illinois, herein referred to as "County" and Progressive Industries, Inc., authorized to do business in the State of Illinois hereinafter referred to as "Contractor":

RECITALS

Whereas, the County and Contractor have entered into a Contract approved by the Chief Procurement Officer on April 23, 2013, (hereinafter referred to as the "Contract"), wherein the Contractor is to provide Medical Grade Gases – Helium, Hydrogen, Nitrogen & Zero Grade Air (hereinafter referred to as the "Supplies") from April 23, 2013 through April 22, 2015 with two, one-year renewal options, in an amount not to exceed \$33,248.00; and

Whereas, Amendment # 1 was executed on September 11, 2014 to increase the Contract in the amount of \$20,000.00; and

Whereas, Amendment # 2 was executed on May 21, 2015 to renew the Contract for one (1) year beginning on April 23, 2015 through April 22, 2016, and to increase the Contract by \$32,000.00; and

Whereas, the Contract will expire April 22, 2016, and the agreed upon Supplies are still required; and

Whereas, an increase in the amount of \$35,000.00 is required for the continuation of Supplies; and

Whereas, the County and Contractor desire to renew the Contract for one (1) year beginning on April 23, 2016 through April 22, 2017.

Now therefore, in consideration of mutual covenants contained herein, it is agreed by and between the parties to amend the Contract as follows:

- 1. The Contract is renewed through April 22, 2017.
- 2. The Contract is increased by \$35,000.00 and the Total Contract Amount is revised to \$120,248.00.
- 3. GC-04 Payment of the Contract is deleted in its entirety and is revised as follows:

All invoices submitted by the Contractor shall be in accordance with the cost provisions contained in the Contract Documents and shall contain a detailed description of the Deliverables (i.e., the goods, equipment, supplies or services) including the quantity of the Deliverables, for which payment is requested. All invoices for services shall include itemized entries indicating the date or time period in which the services were provided, the amount of time spent performing the services, and a detailed description of the services provided during the period of the invoice. All invoices shall reflect the amounts invoiced by and the amounts paid to the Contractor as of the date of the invoice. Invoices for new charges shall not include "past due" amounts, if any, which amounts must be set forth on a separate invoice. Contractor shall not be entitled to invoice the County for any late fees or other penalties.

Contract No. 12-53-448 Vendor Name: PROGRESSIVE INDUSTRIES, INC.

In accordance with Section 34-177 of the Cook County Procurement Code, the County shall have a right to set off and subtract from any invoice(s) or Contract price, a sum equal to any fines and penalties, including interest, for any tax or fee delinquency and any debt or obligation owed by the Contractor to the County.

The Contractor acknowledges its duty to ensure the accuracy of all invoices submitted to the County for payment. By submitting the invoices, the Contractor certifies that all itemized entries set forth in the invoices are true and correct. The Contractor acknowledges that by submitting the invoices, it certifies that it has delivered the Deliverables, i.e., the goods, supplies or equipment set forth in the Contract to the Using Agency, or that it has properly performed the services set forth in the Contract. The invoice must also reflect the dates and amount of time expended in the provision of services under the Contract. The Contractor acknowledges that any inaccurate statements or negligent or intentional misrepresentations in the invoices shall result in the County exercising all remedies available to it in law and equity including, but not limited to, a delay in payment or nonpayment to the Contractor, and reporting the matter to the Cook County Office of the Independent Inspector General.

When a Contractor receives any payment from the County for any supplies, equipment, goods, or services, it has provided to the County pursuant to its Contract, the Contractor must make payment to its subcontractors within 15 days after receipt of payment from the County, provided that such subcontractor has satisfactorily provided the supplies, equipment, goods or services in accordance with the Contract and provided the Contractor with all of the documents and information required of the Contractor. The Contractor may delay or postpone payment to a subcontractor when the subcontractor's supplies, equipment, goods, or services do not comply with the requirements of the Contract, the Contractor is acting in good faith, and not in retaliation for a subcontractor exercising legal or contractual rights.

The attached Economic Disclosures Statement, Identification of Subcontractor/Supplier/Subconsultant Form, and MBE/WBE Utilization Plan forms are incorporated and made a part of this Contract.

4. All other terms and conditions remain as stated in the Contract.

In witness whereof, the County and Contractor have caused this Amendment No.3 to be executed on the date and year last written below.

Cou	nty of Cook, Illinois	Progressive/Industries) Inc.
Ву:	Chief Procurement Officer	Signed Samuel, Jas
Ву:	Alu	Vaterie Or Donnel
	State's Attorney (if applicable)	Type or print name
		President
		Title
Date	11 March 2016	Date: (2-10-15

Contract No. 12-53-448 Vendor Name: PROGRESSIVE INDUSTRIES, INC.

ATTACHMENT

Cook County Office of the Chief Procurement Officer Identification of Subcontractor/Supplier/Subconsultant Form

	OCPO ONLY
Ω	Disqualification
$\overline{\Omega}$	Check Complete

The Bidder/Proposer/Respondent ("the Contractor") will fully complete and execute and submit an Identification of Subcontractor/Supplier/Subconsultant Form ("ISF") with each Bid, Request for Proposal, and Request for Qualification. The Contractor must complete the ISF for each Subcontractor, Supplier or Subconsultant which shall be used on the Contract. In the event that there are any changes in the utilization of Subcontractors, Suppliers or Subconsultants, the Contractor must file an updated ISF.

Bid/RFP/RFQ No.: 17-53-448	Date:
Total Bid or Proposal Amount 170,748.00	Contract Title:
Contractor PROGRESSIVE INDUSTRIES, INC.	Subcontractor/Supplier/ Subconsultant to be added or substitute:
Authorized Contact Jonessy SciVer	Authorized Contact for Subcontractor/Supplier/ Subconsultant:
(Contractor): Sciller oprogressive 9:2: COM	Email Address (Subcontractor):
Company Address 413 W. Belmont (Contractor): Unit C	Company Address (Subcontractor):
City, State and Zip (Contractor): Children D. D. (2064)	City, State and Zip (Subcontractor):
Telephone and Fax (Contractor) 743-763-9566	Telephone and Fax (Subcontractor)
Estimated Start and Completion Dates A SAP (Contractor)	Estimated Start and Completion Dates (Subcontractor)

Note: Upon request, a copy of all written subcontractor agreements must be provided to the OCPO.

	Description of Services or Supplies	Total Price of Subcontract for Services or Supplies
Proude	Coses	\$170,248.00

The subcontract documents will incorporate all requirements of the Contract awarded to the Contractor as applicable. The subcontract will in no way hinder the Subcontractor/Supplier/Subconsultant from maintaining its progress on any other contract on which it is either a Subcontractor/Supplier/Subconsultant or principal contractor. This disclosure is made with the understanding that the Contractor is not under any circumstances relieved of its abilities and obligations, and is responsible for the organization, performance, and quality of work. This form does not approve any proposed changes, revisions or modifications to the contract approved MBE/WBE Utilization Plan. Any changes to the contract's approved MBE/WBE/Utilization Plan must be submitted to the Office of the Contract Compliance.

Contractor	PROGRESSIVE II	NDUSTRIES, INC.		
Name 50	nessa Seodes	Assist at	Servetory	
Title	mina			
Prime Contra	astor Signature		Date	



TONI PRECKWINKLE

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> SEAN M. MORRISON 17th District

OFFICE OF CONTRACT COMPLIANCE

JACQUELINE GOMEZ

DIRECTOR

118 N. Clark, County Building, Room 1020

Chicago, Illinois 60602

(312) 603-5502

February 1, 2016

Ms. Shannon E. Andrews Chief Procurement Officer 118 N. Clark Street County Building-Room 1018 Chicago, IL 60602

Contract No. 12-53-448
 Medical Grade Gases – Helium, Hydrogen, Nitrogen & Zero Grade Air
 Medical Examiner's Office

Dear Ms. Andrews:

The Office of Contract Compliance is in receipt of the above-reference contract amendment and has reviewed it for compliance with the Minority and Women-owned Business Enterprises (MBE/WBE) Ordinance. After careful review, it has been determined this amendment is responsive to the Ordinance.

Bidder: Progressive Industries, Inc.
Original Contract Value: \$33,248.00

Increased Contract Value: \$20,000.00 (Amendment No. 1)

New Contract Value: \$53,248.00

Increased Contract Value; \$32,000.00 (Amendment No. 2)

New Contract Value: \$85,248.00 Contract Extension: 12 months

New Contract Term: April 23, 2015 through April 22, 2016 Increased Contract Value: \$35,000.00 (Amendment No.3)

New Contract Value: \$120,248.00 Contract Extension: 12 months

New Contract Term: April 23, 2016 through April 22, 2017

Contract Goal: 12% MBE, 5%/WBE

MBE/WBEStatusCertifying AgencyCommitmentProgressive Industries, Inc.WBE-7Cook County100% (Direct)

Full MBE Waiver Granted: Due to price(s) quoted by potential MBEs are above competitive levels and increase cost of doing business and would make acceptance of such MBE bid economically impracticable, taking into consideration the percentage of total contract price represented by such MBE bid.

The Office of Contract Compliance has been advised by the Requesting Department that no other bidders are being recommended for award. Revised MBE/WBE forms were used in the determination of the responsiveness of this contract.

Jacqueline Gomez
Contract Compliance Director
JG/smp

cc: Ryan Connor, OCPO
Nadine Jakubowski, Medical Examiner's Office
Enclosures: Revised Waiver Justification

MBE/WBE UTILIZATION PLAN - FORM 1

BIDDER/PROPOSER HEREBY STATES that all MBE/WBE firms included in this Plan are certified MBEs/WBEs by at least one of the entities listed in the General Conditions - Section 19.

l.	BIDDER/	PROPOSER MBE/WBE STATUS: (check the appropriate line)
	X	Bidder/Proposer is a certified MBE or WBE firm. (If so, attach copy of current Letter of Certification)
	•••	Bidder/Proposer is a Joint Venture and one or more Joint Venture partners are certified MBEs or WBEs. (If so, attach copies of Letter(s) of Certification, a copy of Joint Venture Agreement clearly describing the role of the MBE/WBE firm(s) and its ownership interest in the Joint Venture and a completed Joint Venture Affidavit – available online at www.cookcountyii.gov/contractcompliance)
		Bidder/Proposer is not a certified MBE or WBE firm, nor a Joint Venture with MBE/WBE partners, but will utilize MBE and WBE firms either directly or indirectly in the performance of the Contract. (If so, complete Sections II below and the Letter(s) of Intent – Form 2).
II.		Direct Participation of MBE/WBE Firms Indirect Participation of MBE/WBE Firms
achieve achieve	Direct P	als have not been achieved through direct participation, Bidder/Proposer shall include documentation outlining efforts to articipation at the time of Bid/Proposal submission. Indirect Participation will only be considered after all efforts to articipation have been exhausted. Only after written documentation of Good Faith Efforts is received will Indirect considered.
	MBEs/W	BEs that will perform as subcontractors/suppliers/consultants include the following:
		MBE/WBE Firm: PROGRESSIVE INDUSTRIES, INC.
		Address: 4131 W. Belmont Are, Unit C, Chicago, IL 60641
		E-mail: JSeider@progressive più lom
		Contact Person: 1 ant 35a Seiver Phone: 7+3-763-9566
		Dollar Amount Participation: \$ 170,746,00
		Percent Amount of Participation:
		*Letter of Intent attached? Yes No
		MBE/WBE Firm:
		Address:
		E-mail:
		Contact Person: Phone:
		Dollar Amount Participation: \$
		Percent Amount of Participation:
		*Letter of Intent attached? Yes No *Current Letter of Certification attached? Yes No
		Attach additional sheets as needed

 * Letter(s) of Intent and current Letters of Certification $\underline{\text{must}}$ be submitted at the time of bid.

MBE/WBE LETTER OF INTENT - FORM 2					
M/WBE Firm: PROGRESSIVE INDUSTRIES, INC.	Certifying Agency: MUTIPLE CERS				
Contact Person: Jonessa Sei Ju	Certification Expiration Date: See a Hocky				
Address: 4131 W. Belmont Unit C	Ethnicity: (GUCOS rom				
City/State: Chress, DL zip: \$0641	Bid/Proposal/Contract#: <u>17-53-448</u>				
Phone: 773-763-9566Fax: 773-763-959					
Email: JSelder aprogressive pillicon	•				
Participation: M Direct [] Indirect					
Will the M/WBE firm be subcontracting any of the goods or serv	rices of this contract to another firm?				
No [] Yes – Please attach explanation. Proposed Sub	ocontractor(s):				
The undersigned M/WBE is prepared to provide the following C more space is needed to fully describe M/WBE Firm's proposed scope	ommodities/Services for the above named Project/ Contract: (If of work and/or payment schedule, attach additional sheets)				
Indicate the Dollar Amount , Percentage , and the Terms of Pa	ayment for the above-described Commodities/ Services:				
\$ 170,748.00 100%	net 30				
work, conditioned upon (1) the Bidder/Proposer's receipt of Subcontractor remaining compliant with all relevant credential County, and the State to participate as a MBE/WBE firm for the did not affix their signatures to this document until all areas und Signature (M/WBE) Print Name	tent will become a binding Subcontract Agreement for the above a signed contract from the County of Cook; (2) Undersigned Is, codes, ordinances and statutes required by Contractor, Cook ne above work. The Undersigned Parties do also certify that they Iter Description of Service/ Supply and Fee/Cost were completed. Signature (Prime Bidder/Proposer) Print Name PROGRESSIVE INDUSTRIES, INC.				
PROGRESSIVE INDUSTRIES, ING.	Firm Name				
Date 12 . 11 . 15	2 · 1 · 1 5				
Subscribed and sworn before me					
this Hiday of DIC 2015 1	Subscribed and sworn before me				
WISH CONTROL OF THE C	Subscribed and sworn before me this Hay of C, 20 5. Notary Public HM (M)				
Kerra O'Donney NOTARY PUBLIC, STATE OF ILLINOIS NY Commission Expires 04/22/16 SEAL	this May of DC 20 5.				



TONI PRECKWINKLE

PRESIDENT

Cook County Board

of Commissioners

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Jid District

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ICAN PATRICIA MURPHY

6th Oster

EDWIN REYES Bun Distract

PETER N. SILVESTRI 9th District

BRIDGET-GAINER
10th District

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JOHNA, BRITCHCY LZIN DISIACI

LARRY SUFFREDIN

GREGG GOSLIN 14th District

TWO IN O. SCHWINGS.

NURCY R. TOBOLSKI Toth District

HANGIMALI DECEDI GÖRMIN. 17th District OFFICE OF CONTRACT COMPLIANCE

JACQUELINE GOMEZ

DIRECTOR

118 N Clark Street ● Chicago, Illinois 60602 ● (312) 603-5502

June 18, 2013

Ms. Valerie O'Donnell
Progressive Industries, Inc.
2733 N.Pulaski
Chicago, IL 60639

Dear Ms. O'Donnell,

Cook County Board President Toni Preckwinkle and City of Chicago Mayor Rahm Emanuel have launched a reciprocal Minority and Women Business Enterprise initiative. This initiative will allow your business to be certified by either the County or City, and have that certification apply to both agencies. This combined effort by the County and City will lessen the financial burden and streamline the certification process by providing a "one stop shop" for MBE/WBEs interested in participating in County and City procurement opportunities:

Progressive Industries, Inc. is currently certified by the City of Chicago as a WBE. Our office has received a No Change affidavit from your company for the same certification status in the same area of expertise.

This letter is to notify you that your designated Host Agency will be the City of Chicago and your WBE certification will be recognized for Cook County contracts, provided that your status with the City of Chicago's M/WBE Program remains in good standing. As such, you will no longer be required to submit your annual No Change Affidavit to Cook County Government. However, if you wish for Cook County to be your designated Host Agency, you must submit a written request stating your preference on company letterhead to paulette, brooks@cookcountyil.gov, no later than 14 days from the date of this letter.

Please note that if you are currently certified with the City of Chicago in a non-construction area i.e., professional services or goods, the County Code requires that you do not exceed 1.) the S.B.A. Size Standards and, 2.) Personal Net Worth standards of approximately \$2MM. If you are a non-construction firm and wish to participate as an MBE/WBE in an upcoming County contract, you must submit an affidavit regarding your Size and Personal Net Worth at the time of the bid. You can download the affidavit from www.cookcountyil.gov/contractcompliance.

If you have further questions and/or comments, please contact Paulette Brooks at 312-603-6843.

Sincerely,

Jacqueline Clomez

Contract Compliance Director

JG/pgb



DEPARTMENT OF PROCUREMENT SERVICES

AUG 1 5 2013

Valerie O'Donnell
Progressive Industries, Inc. 2733 N. Pulaski Chicago, IL 60639 Dear Ms. O'Donnell:

We are pleased to inform you that Progressive Industries, Inc. has been recertified as a Women Business Enterprise ("WBE") by the City of Chicago ("City"). This WBE certification is valid until 02/03/2018; however your firm's certification must be revalidated annually. In the past the City has provided you with an annual letter confirming your certification; such letters will no longer be issued. As a consequence, we require you to be even more diligent in filing your annual No-Change Affidavit 60 days before your annual anniversary date.

It is now your responsibility to check the City's certification directory and verify your certification status. As a condition of continued certification during the five year period stated above, you must file an annual No-Change Affidavit. Your firm's annual No-Change Affidavit is due by 02/03/2014, 02/03/2015, 02/03/2016, and 02/03/2017. Please remember, you have an affirmative duty to file your No-Change Affidavit 60 days prior to the date of expiration. Failure to file your annual No-Change Affidavit may result in the suspension or rescission of your certification.

Your firm's five year certification will expire on 02/03/2018. You have an affirmative duty to file for recertification 60 days prior to the date of the five year anniversary date. Therefore, you must file for recertification by 12/03/2017.

It is important to note that you also have an ongoing affirmative duty to notify the City of any changes in ownership or control of your firm, or any other fact affecting your firm's eligibility for certification within 10 days of such change. These changes may include but are not limited to a change of address, change of business structure, change in ownership or ownership structure, change of business operations, gross receipts and or personal net worth that exceed the program threshold. Failure to provide the City with timely notice of such changes may result in the suspension or rescission of your certification. In addition, you may be liable for civil penalties under Chapter 1-22, "False Claims", of the Municipal Code of Chicago.

Please note - you shall be deemed to have had your certification lapse and will be ineligible to participate as a WBE if you fail to:

File your annual No-Change Affidavit within the required time period;

121 NORTH LASALLE STREET, ROOM 806, CHICAGO ILLINOIS 60602

- Provide financial or other records requested pursuant to an audit within the required time period;
- Notify the City of any changes affecting your firm's certification within 10 days of such change; or
- File your recertification within the required time period.

Please be reminded of your contractual obligation to cooperate with the City with respect to any reviews, audits or investigation of its contracts and affirmative action programs. We strongly encourage you to assist us in maintaining the integrity of our programs by reporting instances or suspicions of fraud or abuse to the City's Inspector General at chicagoinspectorgeneral.org, or 866-IG-TIPLINE (866-448-4754).

Be advised that if you or your firm is found to be involved in certification, bidding and/or contractual fraud or abuse, the City will pursue decertification and debarment. In addition to any other penalty imposed by law, any person who knowingly obtains, or knowingly assists another in obtaining a contract with the City by falsely representing the individual or entity, or the individual or entity assisted is guilty of a misdemeanor, punishable by incarceration in the county jail for a period not to exceed six months, or a fine of not less than \$5,000 and not more than \$10,000 or both.

Your firm's name will be listed in the City's Directory of Minority and Women-Owned Business Enterprises in the specialty area(s) of:

NAICS Code(s):

423450 - Medical, Dental, and Hospital Equipment and Supplies Merchant Wholesalers

423840 - Industrial Supplies Merchant Wholesalers

423850 - Service Establishment Equipment and Supplies Merchant Wholesalers

424690 - Other Chemical and Allied Products Merchant Wholesalers

Your firm's participation on City contracts will be credited only toward **Women Business Enterprise** goals in your area(s) specialty. While your participation on City contracts is not limited to your area of specialty, credit toward goals will be given only for work that is self-performed and providing a commercially useful function that is done in the approved specialty category.

Thank you for your interest in the City's Minority and Women-Owned Business Enterprise (MBE/WBE) Program.

i arainpanan ari muurista pirrikkaa mirrikkaa mirrikaan ka profitai . Jingdidan terangia 2011 aa Mirrikaan karikaan mirrikaan inganta karikaan karikaan mirrikaan mirrikaan karikaan ka kirikaan ka mirrikaan Mirrikaan karikaan magaataa arika kiri ila mirrikaan karikaan mirrikaan karikaan karikaan karikaan karikaan ka

JLR/ha



DEPARTMENT OF PROCUREMENT SERVICES CITY OF CHICAGO

Valerie O'Donnell Progressive Industries, Inc 2733 N. Pulaski Chicago, IL 60639

Annual Certificate Expires: February 3, 2013

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Dear Valerie O'Donnell:

Congratulations on your continued eligibility for certification as a **Women Business Enterprise (WBE)** by the City of Chicago. This certification is valid until **February 3, 2013**.

You have an affirmative duty to file for recertification 60 days prior to the date of expiration. Therefore, you must file for recertification by 12/1/2012.

It is important to note that you also have an ongoing affirmative duty to notify the City of Chicago of any changes in ownership or control of your firm, or any other fact affecting your firm's eligibility for certification within 10 days of such change. These changes may include but are not limited to a change of address, change of business structure, change in ownership or ownership structure, change of business operations, and/or gross receipts that exceed the program threshold.

Please note — you shall be deemed to have had your certification lapse and will be ineligible to participate as a MBE/WBE/BEPD if you fail to:

- o file your No Change Affidavit within the required time period;
- provide financial or other records requested pursuant to an audit within the required time period; or
- notify the City of any changes affecting your firm's certification within 10 days of such change.

Further, if you or your firm is found to be involved in certification, bidding and/or contractual fraud or abuse, the City will pursue decertification and debarment. And in addition to any other penalty imposed by law, any person

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DEPARTMENT OF PROCUREMENT SERVICES CITY OF CHICAGO

Progressive industries, inc

Page 2

who knowingly obtains, or knowingly assists another in obtaining, a contract with the city by falsely representing that the individual or entity, or the individual or entity assisted, is a minority-owned business or a woman-owned business, is guilty of a misdemeanor, punishable by incarceration in the county jail for a period not to exceed six months or a fine of not less than \$5,000.00 and not more than \$10,000, or both.

Your firm is listed in the City's Directory of Minority Business Enterprises and Women Business Enterprises in the specialty area(s) of:

DISTRIBUTOR OF MEDICAL, SURGICAL, LABORATORY AND PHARMACEUTICAL PRODUCTS, EQUIPMENT AND SUPPLIES; CHEMICALS AND WHOLESALE DRUGS; MEDICAL OXYGEN AND GASES; JANITORIAL EQUIPMENT AND SUPPLIES; INDUSTRIAL SAFETY EQUIPMENT AND CLOTHING; COMPUTER HARDWARE,

Your firm's participation on City contracts will be credited only toward Women Business Enterprise (WBE) goals in your area(s) of specialty. While your participation on City contracts is not limited to your specialty, credit toward Women Business Enterprise (WBE) goal will be given only for work done in a specialty category.

Thank you for your continued participation in the City's Supplier Diversity Program.

Sincerely,

Jamie L. Rhee

Chief Procurement Officer

alle Levyallar

August 7, 2014

Valerie O-Donnell Progressive Industries Inc 2733 North Pulaski Avenue Chicago, IL 60639-2119

Certification Term Expires: August 7, 2015

Dear Business Owner:

Re: (FBE) Full Certification Approval

Congratulations! We are pleased to inform you that your firm has been granted certification as a Female Business Enterprise (FBE) under the Business Enterprise Program (BEP) for Minorities, Females, and Persons with Disabilities.

Although your full certification is valid for a five-year term until August 7, 2019, you are required to submit an annual Affadavit of No-Change form 60 days prior to the anniversary day of your certification; you will be notified by BEP to update your certification as a condition of continued certification. It is your responsibility to ensure that your firm's certification remains current. In addition, should any changes occur in ownership and/or control of the business or other changes affecting the firm's operations, you are required to notify this office within 14 business days of such changes. Failure to return the annual No-change Affidavit or notify our office of any changes will result in decentification of your firm.

Please be advised, while this certification does not guarantee you will receive a State contract, it does assure your firm the opportunity to participate in the State's procurement process. Your firm's participation on State contracts will be credited only toward Female Business Enterprise (FBE) goals in your area(s) of specialty. Your firm's name will appear in the State's Directory as a certified vendor with the Business Enterprise Program (BEP) in the specialty area(s) of:

WINDOW BLINDS AND SHADES, VENETIAN, ETC. CALCIUM CHLORIDE, FLAKE CALCIUM CHLORIDE, LIQUID CULTURE MEDIA, PREPARED, LE, AGAR MEDIA DRUGS, BRAND NAME DRUGS, GENERIC VACCINES AND ANTIGENS MANNIKINS AND MODELS, CPR TRAINING FIRST ALD SUPPLIES AND KITS LABORATORY SUPPLIES (NOT ELSEWHERE BLOOD COLLECTION TUBES: SERUM, CELLS AND CUVETTES (FOR PHOTOMETRY AND CHEMICALS, LABORATORY (ACS, CP, REAGENT KITS, ASSEMBLED: BLOOD/URINE TEST LAB. EQUIP (GEN. ANALYT. & RESEARCH USE) LAB, EQUIP, BALANCES AND ACCESSORIES LAB. EQUIP., CENTRIFUGES, DESK TOP, ETC. MICRÓSCOPES, ALL TYPES LABORATORY OVENS CULVERTS, LINERS, POLYETHYLENE HAND, PLATFORM, MANUAL PALLET TRUCKS SCALES STREET SWEEPERS VETERINARY SUPPLIES VETERINARY EQUIPMENT

100 W Randolph St., Suite 4-100, Chicago, IL 60601

Delumit ou Domistal Dines

VETERINARY PHARMACEUTICALS SAFETY SUPPLIES AND EQUPMENT SAFETY EQUIPMENT, SELF-CONTAINED BREATH-SAFETY EQUIPMENT, HARD HATS HOSPITAL SUPPLIES (NOT ELSEWHERE LISTED) HOSPITAL SUPPLIES, BACK SUPPORT BELTS HOSPITAL SUPPLIES, GLOVES, DISPOSABLE, WALKERS WHEELCHAIRS AND REPAIR PARTS DENTAL EQUIPMENT HOSPITAL EQUIPMENT AND INSTRUMENTS (NOT BLOOD PRESSURE AND BLOOD FLOW DETECTION CLINICAL CHEMICAL ANALYSIS ACCESSORIES: DIAGNOSTIC EQUIPMENT, MINOR: PENLIGHTS, DIAGNOSTIC EQUIPMENT (NOT OTHERWISE ELECTROCARDIOGRAPHS (EKG) AND SUPPLIES ELECTROENCEPHALOGRAPHS (EEG) AND EYE, EAR, NOSE AND THROAT EQUIPMENT MEDICATION CARTS PHYSICAL THERAPY EQUIPMENT VAPORIZERS, HUMIDIFIERS AND NEBULIZERS FILM, MEDICAL X-RAY AND CHEMICALS X-RAY AND OTHER RADIOLOGICAL EQUIPMENT AUTOMOTIVE MAINTENANCE, FLOOR MATS FURNITURE, INDUSTRIAL AND SAFETY FURNITURE, LABORATORY FURNITURE, INSTITUTIONAL AND HOSPITAL FURNITURE, EXECUTIVE WARNING DEVICES, REFLECTORS WARNING DEVICES, SIGNS JUGS, BOTTLES, JARS, PLASTIC DOMESTIC DISHWASHING & LAUNDRY SUPPLIES JANITORIAL SUPPLIES, MISC.; BROOMS, AMMONIA, CLEANERS AND PERSONAL HYGIENE DISINFECTANTS, INSTITUTIONAL FLOOR FINISHES, SEALERS AND STRIPPERS FLOOR WAX COMPONENTS INSTITUTIONAL DISHWASHING SUPPLIES GARBAGE CAN LINERS UPHOLSTERY, FABRIC DRAPFRY MATERIAL, DRAPERIES & HARDWARE HOUSEHOLD LINENS-TOWELS, SHEETS, ETC. PILLOWS, ALL TYPES WEARING APPAREL, WORK GLOVES WEAR, APPAREL, LEATHER JACKETS-UNIFORM WEARING APPAREL, SCREENTRINTED WEARING APPAREL, WORK UNIFORMS WIPING RAGS, ALL TYPES WIPING RAGS, FABRIC, NON-WOVEN

Please visit our website at www.sell2.illinois.gov to obtain information about current and upcoming procurement opportunities, contracts, forms, and also to register to receive email alerts when the State is preparing to purchase a product or service you may provide.

Thank you for your participation in the Business Enterprise Program (BEP). We welcome your participation and wish you continued success.

Carlos Gutierrez
Certification Manager
Business Enterprise Program

(LI3FBE)





567 West Lake Street
Chicago, Illinois :60661-1498
TEL 312 564-7200
www.transitchicago.com

October 9, 2014

Ms. Valerie O' Donnell Progressive Industries, Inc. 2733 N. Pulaski Chicago, IL 60639

Dear Ms. O' Donnell:

The Chicago Transit Authority has reviewed your No Change Affidavit and supporting documentation and is pleased to inform you that your firm continues to meet the Disadvantaged Business Enterprise (DBE) program certification eligibility standards set forth in 49 CFR Part 26. Your Continued Eligibility Affidavit is due July 29, 2015. Notification will be sent to you sixty (60) days prior to this date.

This certification allows your firm to participate as a DBE in the Illinois Unified Certification Program (ICUCP). The participating agencies include the Illinois Department of Transportation, the City of Chicago, the Chicago Transit Authority, Metra and Pace.

If there is any change in certification that affects your ability to meet size, disadvantaged status, ownership, or control requirements or any material change in the information provided in your initial application, you <u>must</u> provide written notification to this agency within thirty (30) days of the occurrence of the change. Failure to provide this information is a ground for denial of certification based on failure to cooperate pursuant to 49 CFR 26.109(c).

Your firm's name will appear in the It. UCP DBE Directory, which is used by prime contractors/consultants, as well as other agencies, to solicit participation of DBE firms. The directory can be accessed at www.ctavendor.com. Your firm's name will appear in the IL UCP DBE Directory under the following:

.

NAICS Code:

423450: MEDICAL, DENTAL, AND HOSPITAL EQUIPMENT AND SUPPLIES MERCHANT WHOLESALERS

423510: METALS SERVICE CENTERS

423840: INDUSTRIAL SUPPLIES MERCHANT WHOLESALERS

423850: SERVICE ESTABLISHMENT EQUIPMENT AND SUPPLIES MERCHANT WHOLESALERS

423860: TRANSPORTATION EQUIPMENT AND SUPPLIES (EXCEPT MARINE PLEASURE CRAFT, MOTOR VEHICLES)

MERCHANT WHOLESALERS

423990: OTHER MISCELLANEOUS DURABLE GOODS MERCHANT WHOLESALERS

424340: FOOTWEAR MERCHANT WHOLESALERS

424690: OTHER CHEMICAL AND ALLIED PRODUCTS MERCHANT WHOLESALERS

424720: PETROLEUM AND PETROLEUM PRODUCTS MERCHANT WHOLESALERS (EXCEPT BULK STATIONS, TERMINALS)

Specialty:

423450: Medical, Dental, and Hospital Equipment and Supplies Merchant Wholesalers

423840: Industrial supplies (except disposable plastics, paper) merchant wholesalers

423850: Service establishment equipment and supplies merchant wholesalers

424340: Footwear merchant wholesalers

424690: Gases, compressed and liquefied (except liquefied petroleum gas), merchant wholesalers

424720: Lubricating oils and greases merchant wholesalers (except bulk stations, terminals)



CHICAGO TRANSIT AUTHORITY

567 West Lake Street Chicago, Illinois 69661-1498 TEL 312 664-7200 www.transijchicago.com

Your participation on contracts will only be credited toward DBE contract goals when your firm performs in a Commercially Useful Function (CUF) in its approved area(s) of specialty. Please direct all inquiries and any questions to this agency at (312) 681-2601.

Sincerely,

Carolyn A. Williams Meza Director, Diversity Programs

1401 (4) (2014)

PROGRESSIVE INDUSTRIES, INC.

2733 N. Pulaski Rd.
Chicago, IL 60639
PH (773) 763-9566 FAX (773) 763-9587
ProgressivePil.com • Founded 1985 • Certified WBE/DBE/HUBZone



To Whom It May Concern,

I, Valerie O'Donnell, President of Progressive Industries, INC, allow Janessa Seider, assistant secretary of Progressive Industries, INC, to attest my signature on contract number 1484-14262.

Sincerely

Valerie R. O'Donne

President

PETITION FOR REDUCTION/WAIVER OF MBE/WBE PARTICIPATION - FORM 3

A.	BIDDER/PROPOSER HEREBY REQUESTS:	
	FULL MBE WAIVER	FULL WBE WAIVER
	REDUCTION (PARTIAL MBE and/or WBE PA	RTICIPATION)
	% of Reduction for MBE Participation% of Reduction for WBE Participation	
В.	REASON FOR FULL/REDUCTION WAIVER REQUE	<u></u>
	Bidder/Proposer shall check each item applicable to it documentation shall be submitted with this request.	s reason for a waiver request. Additionally, supporting
	(1) Lack of sufficient qualified MBEs and/or WBE: by the contract. (Please explain)	s capable of providing the goods or services required
		ts for performing the contract make it impossible or to enable the contractor to utilize MBEs and/or WBEs n. (Please explain)
	doing business and would make acceptance of	Es are above competitive levels and increase cost of of such MBE and/or WBE bid economically reentage of total contract price represented by such
	(4) There are other relevant factors making it impo and/or WBE firms. (Please explain)	ossible or economically infeasible to utilize MBE
C.	GOOD FAITH EFFORTS TO OBTAIN MBE/WBE PA	RTICIPATION
		ith a timely opportunity to review and obtain relevant proposal to enable MBEs and WBEs to prepare an
	(2) Used the services and assistance of the Offic	e of Contract Compliance staff. (Please explain)
	(3) Timely notified and used the services and ass organizations. (Attach of copy written solic	sistance of community, minority and women business itations made)
	(4) Followed up on initial solicitation of MBEs and business. (Attach supporting documentation)	WBEs to determine if firms are interested in doing on)
	(5) Engaged MBEs & WBEs for direct/indirect pa	rticipation. (Please explain)
D.	OTHER RELEVANT INFORMATION	
	Attach any other documentation relative to Good Fa	ith Efforts in complying with MRE/M/RE porticipation

M/WBE Reduction/Waiver Request - Form 3

Revised: 01/29/14

PROGRESSIVE INDUSTRIES, INC.

2733 N. Pulaski Rd. Chicago, IL 60639 PH (773) 763-9566 FAX (773) 763-9587 ProgressivePii.com • Founded 1985 • Certified WBE/DBE/HUBZone



07/15/2015

Re: Cook County Bid Contract 1584-14618 Reason for Full/Reduction Waiver Request

To Whom It May Concern:

Progressive Industries is seeking a Full Waiver Request for Contract #1584-14618. For this specific contract, it would be economically infeasable to add a 3rd party in order to accomadate the participation of a Minority Business. Progressive Industries is a proudly certified WBE, and is a direct distributor of the manufacturer. Adding another component would be an infeasible busineess solution. As this is being sourced direct from the manufacturer, we are at their mercy with regard to contracted shipping agreements. Thank you for your considerations.

Sincerely, Janessa Seider VP Contracts & Supply Chain

COOK COUNTY ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT INDEX

Section	Description	Pages
1 .	Instructions for Completion of EDS	EDS i - ii
2	Certifications	EDS 1-2
3	Economic and Other Disclosures, Affidavit of Child Support Obligations, Disclosure of Ownership Interest and Familial Relationship Disclosure Form	EDS 3 – 12
4	Cook County Affidavit for Wage Theft Ordinance	EDS 13-14
5	Contract and EDS Execution Page	EDS 15-17
6	Cook County Signature Page	EDS 18

SECTION 1 INSTRUCTIONS FOR COMPLETION OF ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT

This Economic Disclosure Statement and Execution Document ("EDS") is to be completed and executed by every Bidder on a County contract, every Proposer responding to a Request for Proposals, and every Respondent responding to a Request for Qualifications, and others as required by the Chief Procurement Officer. The execution of the EDS shall serve as the execution of a contract awarded by the County. The Chief Procurement Officer reserves the right to request that the Bidder or Proposer, or Respondent provide an updated EDS on an annual basis.

Definitions. Terms used in this EDS and not otherwise defined herein shall have the meanings given to such terms in the Instructions to Bidders, General Conditions, Request for Proposals, Request for Qualifications, as applicable.

Affiliate means a person that directly or indirectly through one or more intermediaries, Controls is Controlled by, or is under common Control with the Person specified.

Applicant means a person who executes this EDS.

Bidder means any person who submits a Bid.

Code means the Code of Ordinances, Cook County, Illinois available on municode.com.

Contract shall include any written document to make Procurements by or on behalf of Cook County.

Contractor or Contracting Party means a person that enters into a Contract with the County.

Control means the unfettered authority to directly or indirectly manage governance, administration, work, and all other aspects of a business.

EDS means this complete Economic Disclosure Statement and Execution Document, including all sections listed in the Index and any attachments.

Joint Venture means an association of two or more Persons proposing to perform a forprofit business enterprise. Joint Ventures must have an agreement in writing specifying the terms and conditions of the relationship between the partners and their relationship and respective responsibility for the Contract

Lobby or lobbying means to, for compensation, attempt to influence a County official or County employee with respect to any County matter.

Lobbyist means any person who lobbies.

Person or Persons means any individual, corporation, partnership, Joint Venture, trust, association, Limited Liability Company, sole proprietorship or other legal entity.

Prohibited Acts means any of the actions or occurrences which form the basis for disqualification under the Code, or under the Certifications hereinafter set forth.

Proposal means a response to an RFP.

Proposer means a person submitting a Proposal.

Response means response to an RFQ.

Respondent means a person responding to an RFQ.

RFP means a Request for Proposals issued pursuant to this Procurement Code.

RFQ means a Request for Qualifications issued to obtain the qualifications of interested parties.

INSTRUCTIONS FOR COMPLETION OF ECONOMIC DISCLOSURE STATEMENT AND EXECUTION DOCUMENT

Section 1: Instructions. Section 1 sets forth the instructions for completing and executing this EDS.

Section 2: Certifications. Section 2 sets forth certifications that are required for contracting parties under the Code and other applicable laws. Execution of this EDS constitutes a warranty that all the statements and certifications contained, and all the facts stated, in the Certifications are true, correct and complete as of the date of execution.

Section 3: Economic and Other Disclosures Statement. Section 3 is the County's required Economic and Other Disclosures Statement form. Execution of this EDS constitutes a warranty that all the information provided in the EDS is true, correct and complete as of the date of execution, and binds the Applicant to the warranties, representations, agreements and acknowledgements contained therein.

Required Updates. The Applicant is required to keep all information provided in this EDS current and accurate. In the event of any change in the information provided, including but not limited to any change which would render inaccurate or incomplete any certification or statement made in this EDS, the Applicant shall supplement this EDS up to the time the County takes action, by filing an amended EDS or such other documentation as is required.

Additional Information. The County's Governmental Ethics and Campaign Financing Ordinances impose certain duties and obligations on persons or entities seeking County contracts, work, business, or transactions, and the Applicant is expected to comply fully with these ordinances. For further information please contact the Director of Ethics at (312) 603-4304 (69 W. Washington St. Suite 3040, Chicago, IL 60602) or visit the web-site at cookcountyil.gov/ethics-board-of.

Authorized Signers of Contract and EDS Execution Page. If the Applicant is a corporation, the President and Secretary must execute the EDS. In the event that this EDS is executed by someone other than the President, attach hereto a certified copy of that section of the Corporate By-Laws or other authorization by the Corporation, satisfactory to the County that permits the person to execute EDS for said corporation. If the corporation is not registered in the State of Illinois, a copy of the Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a partnership or joint venture, all partners or joint venturers must execute the EDS, unless one partner or joint venture has been authorized to sign for the partnership or joint venture, in which case, the partnership agreement, resolution or evidence of such authority satisfactory to the Office of the Chief Procurement Officer must be submitted with this Signature Page.

If the Applicant is a member-managed LLC all members must execute the EDS, unless otherwise provided in the operating agreement, resolution or other corporate documents. If the Applicant is a manager-managed LLC, the manager(s) must execute the EDS. The Applicant must attach either a certified copy of the operating agreement, resolution or other authorization, satisfactory to the County, demonstrating such person has the authority to execute the EDS on behalf of the LLC. If the LLC is not registered in the State of Illinois, a copy of a current Certificate of Good Standing from the state of incorporation must be submitted with this Signature Page.

If the Applicant is a Sole Proprietorship, the sole proprietor must execute the EDS.

A "Partnership" "Joint Venture" or "Sole Proprietorship" operating under an Assumed Name must be registered with the Illinois county in which it is located, as provided in 805 ILCS 405 (2012), and documentation evidencing registration must be submitted with the EDS.

SECTION 2

CERTIFICATIONS

THE FOLLOWING CERTIFICATIONS ARE MADE PURSUANT TO STATE LAW AND THE CODE. THE APPLICANT IS CAUTIONED TO CAREFULLY READ THESE CERTIFICATIONS PRIOR TO SIGNING THE SIGNATURE PAGE. SIGNING THE SIGNATURE PAGE SHALL CONSTITUTE A WARRANTY BY THE APPLICANT THAT ALL THE STATEMENTS, CERTIFICATIONS AND INFORMATION SET FORTH WITHIN THESE CERTIFICATIONS ARE TRUE, COMPLETE AND CORRECT AS OF THE DATE THE SIGNATURE PAGE IS SIGNED. THE APPLICANT IS NOTIFIED THAT IF THE COUNTY LEARNS THAT ANY OF THE FOLLOWING CERTIFICATIONS WERE FALSELY MADE, THAT ANY CONTRACT ENTERED INTO WITH THE APPLICANT SHALL BE SUBJECT TO TERMINATION.

A. PERSONS AND ENTITIES SUBJECT TO DISQUALIFICATION

No person or business entity shall be awarded a contract or sub-contract, for a period of five (5) years from the date of conviction or entry of a plea or admission of guilt, civil or criminal, if that person or business entity:

- 1) Has been convicted of an act committed, within the State of Illinois, of bribery or attempting to bribe an officer or employee of a unit of state, federal or local government or school district in the State of Illinois in that officer's or employee's official capacity;
- 2) Has been convicted by federal, state or local government of an act of bid-rigging or attempting to rig bids as defined in the Sherman Anti-Trust Act and Clayton Act. Act. 15 U.S.C. Section 1 *et seq.*;
- Has been convicted of bid-rigging or attempting to rig bids under the laws of federal, state or local government;
- 4) Has been convicted of an act committed, within the State, of price-fixing or attempting to fix prices as defined by the Sherman Anti-Trust Act and the Clayton Act. 15 U.S.C. Section 1, et seq.;
- Has been convicted of price-fixing or attempting to fix prices under the laws the State;
- Has been convicted of defrauding or attempting to defraud any unit of state or local government or school district within the State of Illinois;
- 7) Has made an admission of guilt of such conduct as set forth in subsections (1) through (6) above which admission is a matter of record, whether or not such person or business entity was subject to prosecution for the offense or offenses admitted to: or
- 8) Has entered a plea of *nolo contendere* to charge of bribery, price-fixing, bid-rigging, or fraud, as set forth in sub-paragraphs (1) through (6) above.

In the case of bribery or attempting to bribe, a business entity may not be awarded a contract if an official, agent or employee of such business entity committed the Prohibited Act on behalf of the business entity and pursuant to the direction or authorization of an officer, director or other responsible official of the business entity, and such Prohibited Act occurred within three years prior to the award of the contract. In addition, a business entity shall be disqualified if an owner, partner or shareholder controlling, directly or indirectly, 20% or more of the business entity, or an officer of the business entity has performed any Prohibited Act within five years prior to the award of the Contract.

THE APPLICANT HEREBY CERTIFIES THAT: The Applicant has read the provisions of Section A, Persons and Entities Subject to Disqualification, that the Applicant has not committed any Prohibited Act set forth in Section A, and that award of the Contract to the Applicant would not violate the provisions of such Section or of the Code.

B. BID-RIGGING OR BID ROTATING

THE APPLICANT HEREBY CERTIFIES THAT: In accordance with 720 ILCS 5/33 E-11, neither the Applicant nor any Affiliated Entity is barred from award of this Contract as a result of a conviction for the violation of State laws prohibiting bid-rigging or bid rotating.

C. DRUG FREE WORKPLACE ACT

THE APPLICANT HEREBY CERTIFIES THAT: The Applicant will provide a drug free workplace, as required by (30 ILCS 580/3).

D. DELINQUENCY IN PAYMENT OF TAXES

THE APPLICANT HEREBY CERTIFIES THAT: The Applicant is not an owner or a party responsible for the payment of any tax or fee administered by Cook County, by a local municipality, or by the Illinois Department of Revenue, which such tax or fee is delinquent, such as bar award of a contract or subcontract pursuant to the Code, Chapter 34, Section 34-171.

E. HUMAN RIGHTS ORDINANCE

No person who is a party to a contract with Cook County ("County") shall engage in unlawful discrimination or sexual harassment against any individual in the terms or conditions of employment, credit, public accommodations, housing, or provision of County facilities, services or programs (Code Chapter 42, Section 42-30 et seq.).

F. ILLINOIS HUMAN RIGHTS ACT

THE APPLICANT HEREBY CERTIFIES THAT: It is in compliance with the Illinois Human Rights Act (775 ILCS 5/2-105), and agrees to abide by the requirements of the Act as part of its contractual obligations.

G. INSPECTOR GENERAL (COOK COUNTY CODE, CHAPTER 34, SECTION 34-174 and Section 34-250)

The Applicant has not willfully failed to cooperate in an investigation by the Cook County Independent Inspector General or to report to the Independent Inspector General any and all information concerning conduct which they know to involve corruption, or other criminal activity, by another county employee or official, which concerns his or her office of employment or County related transaction.

The Applicant has reported directly and without any undue delay any suspected or known fraudulent activity in the County's Procurement process to the Office of the Cook County Inspector General.

H. CAMPAIGN CONTRIBUTIONS (COOK COUNTY CODE, CHAPTER 2, SECTION 2-585)

THE APPLICANT CERTIFIES THAT: It has read and shall comply with the Cook County's Ordinance concerning campaign contributions, which is codified at Chapter 2, Division 2, Subdivision II, Section 585, and can be read in its entirety at www.municode.com.

I. GIFT BAN, (COOK COUNTY CODE, CHAPTER 2, SECTION 2-574)

THE APPLICANT CERTIFIES THAT: It has read and shall comply with the Cook County's Ordinance concerning receiving and soliciting gifts and favors, which is codified at Chapter 2, Division 2, Subdivision II, Section 574, and can be read in its entirety at www.municode.com.

J. LIVING WAGE ORDINANCE PREFERENCE (COOK COUNTY CODE, CHAPTER 34, SECTION 34-160;

Unless expressly waived by the Cook County Board of Commissioners, the Code requires that a living wage must be paid to individuals employed by a Contractor which has a County Contract and by all subcontractors of such Contractor under a County Contract, throughout the duration of such County Contract. The amount of such living wage is annually by the Chief Financial Officer of the County, and shall be posted on the Chief Procurement Officer's website.

The term "Contract" as used in Section 4, I, of this EDS, specifically excludes contracts with the following:

- 1) Not-For Profit Organizations (defined as a corporation having tax exempt status under Section 501(C)(3) of the United State Internal Revenue Code and recognized under the Illinois State not-for -profit law);
- Community Development Block Grants;
- Cook County Works Department;
- 4) Sheriff's Work Alternative Program; and
- 5) Department of Correction inmates.

SECTION 3

REQUIRED DISCLOSURES

1. DISCLOSURE OF LOBBYIST CONTACTS

List all persons that have made lobbying contacts on your behalf with respect to this contract:

Name	Address
2. LOCA	AL BUSINESS PREFERENCE STATEMENT (CODE, CHAPTER 34, SECTION 34-230)
establishment l and which emp Business if one	means a Person, including a foreign corporation authorized to transact business in Illinois, having a bona fide ocated within the County at which it is transacting business on the date when a Bid is submitted to the County, loys the majority of its regular, full-time work force within the County. A Joint Venture shall constitute a Local or more Persons that qualify as a "Local Business" hold interests totaling over 50 percent in the Joint Venture, it Venture does not, at the time of the Bid submittal, have such a bona fide establishment within the County.
a)	Is Applicant a "Local Business" as defined above?
	Yes: No:
b)	If yes, list business addresses within Cook County:
	4131 W Belmort Are, out C
	Chrago, Dr 6064)
c)	Does Applicant employ the majority of its regular full-time workforce within Cook County?
	Yes: No:

3. THE CHILD SUPPORT ENFORCEMENT ORDINANCE (CODE, CHAPTER 34, SECTION 34-172)

Every Applicant for a County Privilege shall be in full compliance with any child support order before such Applicant is entitled to receive or renew a County Privilege. When delinquent child support exists, the County shall not issue or renew any County Privilege, and may revoke any County Privilege.

All Applicants are required to review the Cook County Affidavit of Child Support Obligations attached to this EDS (EDS-5) and complete the Affidavit, based on the instructions in the Affidavit.

4.	REAL E	ESTATE OWNERSHIP DISCLOSURES	3.			
The App	The Applicant must indicate by checking the appropriate provision below and providing all required information that either:					
	a)		eal estate owned by the Applicant in Cook County:			
		PERMANENT INDEX NUMBER(S):	13-76-300-008-000			
		-				
		-				
		•	ATTACH SHEET IF NECESSARY TO LIST ADDITIONAL INDEX NUMBERS)			
OR:						
	b)	The Applicant owns no real e	estate in Cook County.			
5.	EXCEPTIONS TO CERTIFICATIONS OR DISCLOSURES.					
If the Applicant is unable to certify to any of the Certifications or any other statements contained in this EDS and not explained elsewhere in this EDS, the Applicant must explain below:						
	NIA					
		,				

If the letters, "NA", the word "None" or "No Response" appears above, or if the space is left blank, it will be conclusively presumed

that the Applicant certified to all Certifications and other statements contained in this EDS.

EDS-4

12-53-448

COOK COUNTY DISCLOSURE OF OWNERSHIP INTEREST STATEMENT

The Cook County Code of Ordinances (§2-610 *et seq.*) requires that any Applicant for any County Action must disclose information concerning ownership interests in the Applicant. This Disclosure of Ownership Interest Statement must be completed with all information current as of the date this Statement is signed. Furthermore, this Statement must be kept current, by filing an amended Statement, until such time as the County Board or County Agency shall take action on the application. The information contained in this Statement will be maintained in a database and made available for public viewing.

If you are asked to list names, but there are no applicable names to list, you must state NONE. An incomplete Statement will be returned and any action regarding this contract will be delayed. A failure to fully comply with the ordinance may result in the action taken by the County Board or County Agency being voided.

"Applicant" means any Entity or person making an application to the County for any County Action.

"County Action" means any action by a County Agency, a County Department, or the County Board regarding an ordinance or ordinance amendment, a County Board approval, or other County agency approval, with respect to contracts, leases, or sale or purchase of real estate.

"Person" "Entity" or "Legal Entity" means a sole proprietorship, corporation, partnership, association, business trust, estate, two or more persons having a joint or common interest, trustee of a land trust, other commercial or legal entity or any beneficiary or beneficiaries thereof.

This Disclosure of Ownership Interest Statement must be submitted by :

- 1. An Applicant for County Action and
- 2. A Person that holds stock or a beneficial interest in the Applicant <u>and</u> is listed on the Applicant's Statement (a "Holder") must file a Statement and complete #1 only under **Ownership Interest Declaration**.

Please print or type responses clearly and legibly. Add additional pages if needed, being careful to identify each portion of the form to which each additional page refers.

This Statement is being m	nade by the [ベ] Applica	nt or [] Stock/Bene	ficial Interest Holder	
This Statement is an:	, -	Statement or [] Amended S	tatement	
Identifying Information	RESSIVE INDUSTRIES	3, INC.			
Name					
D/B/A:		FI	EIN NO.: <u>36-</u>	3378948	
Street Address: [13]	w Belmont	unit c			
city: Chiloso		State: ** L		Zip Code: 6064	
Phone No.: <u>113-76</u>	3-9565 Fax Num	ber: 1 43-763	9587	Email: 580 Vero progres	<u>sil</u> epii.
Cook County Business Reg (Sole Proprietor, Joint Ven		× 5 1 - 1			
Corporate File Number (if a	pplicable):	1 16 65 6	,		
Form of Legal Entity:					
[] Sole Proprietor	[] Partnership	Corporatio	n []	Trustee of Land Trust	
[] Business Trust	[] Estate	[] Association	n []	Joint Venture	

Other (describe)

[]

Owners	ship Interest Declaration:		
1.	List the name(s), address, ar ownership) of more than five	nd percent ownership of each Person having a percent (5%) in the Applicant/Holder.	legal or beneficial interest (including
Name		Address	Percentage Interest in
Valer	ie O'Donnell	4131 W Belmont	Applicant/Holder
2.		isted in (1) above is held as an agent or agent on whose behalf the interest is held.	ts,for a nominee or nominees, list the name
	of Agent/Nominee	Name of Principal	Principal's Address
3.	Is the Applicant constructivel	y controlled by another person or Legal Entity	? []Yes []No
	If yes, state the name, addre such control is being or may	ss and percentage of beneficial interest of suc be exercised.	ch person, and the relationship under which
Name	Address	Percentage of Beneficial Interest	Relationship
	ov-C		
Corpor	ate Officers, Members and F	artners Information:	
	addresses for all members. F	ddresses, and terms for all corporate officers. For all partnerships and joint ventures, list the i	
Name	Address	Title (specify title of Office, or whether more partner/joint ventous)	Term of Office nanager ure)
Mern	9 D'Donnell	secretary	
Jong	ssa Serder	AGSIS fort 'Se	entory
Declar	ration (check the applicable	hox),	

I state under oath that the Applicant has withheld no disclosure as to ownership interest in the Applicant nor reserved any information, data or plan as to the intended use or purpose for which the Applicant seeks County Board or other [] County Agency action.

I state under oath that the Holder has withheld no disclosure as to ownership interest nor reserved any information required to be disclosed.

COOK COUNTY DISCLOSURE OF OWNERSHIP INTERES	T STATEMENT SIGNATURE PAGE
Valego (O) Donnel	President
Name of Authorized Applicant/Holder Representative (please print or type)	Title 17-10-15
into@progressivepii. Com	143-763-9566
E-mail address	Phone Number
Subscribed to and sworn before methisday of, 20	My commission expires:
Xena almnel	
Notary Public Signature	Notary Seal
	OFFICIAL STAL Kerra O'Donoo! NOTARY PUBLIC. STATE OF R. MICH. My Commission Pagnics 94/22/18



COOK COUNTY BOARD OF ETHICS

69 W. WASHINGTON STREET, SUITE 3040 CHICAGO, ILLINOIS 60602 312/603-4304 Office 312/603-9988 Fax

FAMILIAL RELATIONSHIP DISCLOSURE PROVISION

Nepotism Disclosure Requirement:

Doing a significant amount of business with the County requires that you disclose to the Board of Ethics the existence of any familial relationships with any County employee or any person holding elective office in the State of Illinois, the County, or in any municipality within the County. The Ethics Ordinance defines a significant amount of business for the purpose of this disclosure requirement as more than \$25,000 in aggregate County leases, contracts, purchases or sales in any calendar year.

If you are unsure of whether the business you do with the County or a County agency will cross this threshold, err on the side of caution by completing the attached familial disclosure form because, among other potential penalties, any person found guilty of failing to make a required disclosure or knowingly filing a false, misleading, or incomplete disclosure will be prohibited from doing any business with the County for a period of three years. The required disclosure should be filed with the Board of Ethics by January 1 of each calendar year in which you are doing business with the County and again with each bid/proposal/quotation to do business with Cook County. The Board of Ethics may assess a late filing fee of \$100 per day after an initial 30-day grace period.

The person that is doing business with the County must disclose his or her familial relationships. If the person on the County lease or contract or purchasing from or selling to the County is a business entity, then the business entity must disclose the familial relationships of the individuals who are and, during the year prior to doing business with the County, were:

- its board of directors,
- · its officers.
- its employees or independent contractors responsible for the general administration of the entity,
- its agents authorized to execute documents on behalf of the entity, and
- its employees who directly engage or engaged in doing work with the County on behalf of the entity.

Do not hesitate to contact the Board of Ethics at (312) 603-4304 for assistance in determining the scope of any required familial relationship disclosure.

Additional Definitions:

"Familial relationship" means a person who is a spouse, domestic partner or civil union partner o	f a County employee or State,
County or municipal official, or any person who is related to such an employee or official, w	hether by blood, marriage or
adoption, as a:	

	1	
☐ Parent	☐ Grandparent	☐ Stepfather
□ Child	☐ Grandchild	☐ Stepmother
☐ Brother	☐ Father-in-law	☐ Stepson
☐ Sister	☐ Mother-in-law	☐ Stepdaughter
□ Aunt	☐ Son-in-law	☐ Stepbrother
□ Uncle	☐ Daughter-in-law	☐ Stepsister
□ Niece	☐ Brother-in-law	☐ Half-brother
☐ Nephew	☐ Sister-in-law	☐ Half-sister

COOK COUNTY BOARD OF ETHICS FAMILIAL RELATIONSHIP DISCLOSURE FORM

A.	PERSON DOING OR SEEKING TO DO BUSINESS WITH THE COUNTY
	Name of Person Doing Business with the County:
	•
	Address of Person Doing Business with the County: 4131 W. Belmort Are
	Phone number of Person Doing Business with the County: 7+3-763-9566
	Email address of Person Doing Business with the County: THO E Progressive Pil-Com
	If Person Doing Business with the County is a Business Entity, provide the name, title and contact information for the individual completing this disclosure on behalf of the Person Doing Business with the County:
	Jonessa Serder-Assistant Secretary-Jserder @progressivepii.co
В.	DESCRIPTION OF BUSINESS WITH THE COUNTY Append additional pages as needed and for each County lease, contract, purchase or sale sought and/or obtained during the calendar year of this disclosure (or the proceeding calendar year if disclosure is made on January 1), identify:
	The lease number, contract number, purchase order number, request for proposal number and/or request for qualification number associated with the business you are doing or seeking to do with the County:
	17-53-448 Medical Grock Goses -
	The aggregate dollar value of the business you are doing or seeking to do with the County: \$ 179,246.00
	The name, title and contact information for the County official(s) or employee(s) involved in negotiating the business you are doing or seeking to do with the County:
	Borb Flack borbic. Flock @ cook countygou.
	The name, title and contact information for the County official(s) or employee(s) involved in managing the business you are doing or seeking to do with the County:
	Dr. Peter Kom peter. Komp work County ILogov
C.	DISCLOSURE OF FAMILIAL RELATIONSHIPS WITH COUNTY EMPLOYEES OR STATE, COUNTY OR MUNICIPAL ELECTED OFFICIALS
	Check the box that applies and provide related information where needed
	The Person Doing Business with the County is an individual and there is no familial relationship between this individual and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.
	The Person Doing Business with the County is a business entity and there is no familial relationship between any member of this business entity's board of directors, officers, persons responsible for general administration of the business entity, agents authorized to execute documents on behalf of the business entity or employees directly engaged in contractual work with the County on behalf of the business entity, and any Cook County employee or any person holding elective office in the State of Illinois, Cook County, or any municipality within Cook County.

COOK COUNTY BOARD OF ETHICS FAMILIAL RELATIONSHIP DISCLOSURE FORM

	individual and at le	ast one Cook County employee	individual and there is a familial e and/or a person or persons holdin thin Cook County. The familial r	g elective office in the State of
	e of Individual Doing ness with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
If mon	The Person Doing one member of this business entity, age engaged in contract	business entity's board of dire ents authorized to execute docu tual work with the County on b	ng the above format. Dusiness entity and there is a fam extors, officers, persons responsible ments on behalf of the business encetalf of the business entity, on the extorior in the State of Illipois, Coo	tor general administration of the tity and/or employees directly one hand, and at least one Cook
of D Entit	municipality withir e of Member of Board irector for Business y Doing Business with County	Name of Related County Employee or State, County Municipal Elected Official	The familial relationships are as for the and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship*
Enti	e of Officer for Business y Doing Business with County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related Gounty Employee or State, County or Municipal Elected Official	Nature of Familial Relationship [*]

Name of Person Responsible for the General Administration of the Business Entity Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship
Name of Agent Authorized to Execute Documents for Business Entity Doing Business with the County	Name of Related County Employee or State County or Municipal Elected Official	Title and Position of Related County Employee or State, Centity or Municipal Elected Official	Naure of Familial Relationship
Name of Employee of Business Envity Directly Engaged in Doing Business with the County	Name of Related County Employee or State, County or Municipal Elected Official	Title and Position of Related County Employee or State, County or Municipal Elected Official	Nature of Familial Relationship
If mo	re space is needed, attach an	additional sheet following the abo	ve format.
VERIFICATION: To the complete I acknowledge the and debalment. Signature of Recipient	best/of my knowledge, the i	nformation I have provided on thite disclosure is punishable by law, Date	s disclosure form is accurate and including but not limited to fines
SUBMIT COMPLETED FO	69 West Was Office (312)	Board of Ethics hington Street, Suite 3040, Chicago 603-4304 – Fax (312) 603-9988 Ethics@cookcountyil.gov	o, Illinois 60602

^{*} Spouse, domestic partner, civil union partner or parent, child, sibling, aunt, uncle, niece, nephew, grandparent or grandchild by blood, marriage (i.e. in laws and step relations) or adoption.

SECTION 4

COOK COUNTY AFFIDAVIT FOR WAGE THEFT ORDINANCE

Effective May 1, 2015, every Person, *Including Substantial Owners*, seeking a Contract with Cook County must comply with the Cook County Wage Theft Ordinance set forth in Chapter 34, Article IV, Section 179. Any Person/Substantial Owner, who fails to comply with Cook County Wage Theft Ordinance, may request that the Chief Procurement Officer grant a reduction or waiver in accordance with Section 34-179(d).

"Contract" means any written document to make Procurements by or on behalf of Cook County.

"Person" means any individual, corporation, partnership, Joint Venture, trust, association, limited liability company, sole proprietorship or other legal entity.

"Procurement" means obtaining supplies, equipment, goods, or services of any kind.

"Substantial Owner" means any person or persons who own or hold a twenty-five percent (25%) or more percentage of interest in any business entity seeking a County Privilege, including those shareholders, general or limited partners, beneficiaries and principals; except where a business entity is an individual or sole proprietorship, Substantial Owner means that individual or sole proprietor.

All Persons/Substantial Owners are required to complete this affidavit and comply with the Cook County Wage Theft Ordinance before any Contract is awarded. Signature of this form constitutes a certification the information provided below is correct and complete, and that the individual(s) signing this form has/have personal knowledge of such information.

1.	Contract Information:
Contract	Number: 17-53-448
County I	Jsing Agency (requesting Procurement): (() () () () () () () () ()
II.	Person/Substantial Owner Information:
Person (Corporate Entity Name): PROGRESSIVE INDUSTRIES, INC.
Substan	tial Owner Complete Name: Valerce Or Dunnell
FEIN#	36-3378948
Date of I	Birth: E-mail address: MOO Profitsing (cm
Street A	ddress: 4131 W Belmont Ave, Unit C
City:	Chittico State: DL zip: 6064
Home P	hone: (773-76)-9566 Driver's License No:
III.	Compliance with Wage Laws:
entered	ne past five years has the Person/Substantial Owner, in any judicial or administrative proceeding, been convicted of, a plea, made an admission of guilt or liability, or had an administrative finding made for committing a repeated or willful of any of the following laws:
	Illinois Wage Payment and Collection Act, 820 ILCS 115/1 et seq., YES or
	Illinois Minimum Wage Act, 820 ILCS 105/1 et seq., YES or NO
	Illinois Worker Adjustment and Retraining Notification Act, 820 ILCS 65/1 et seq., YES or
	Employee Classification Act, 820 ILCS 185/1 et seq., YES o NO
	Fair Labor Standards Act of 1938, 29 U.S.C. 201, et seq., YES or NO
	Any comparable state statute or regulation of any state, which governs the payment of wages YES or NO

If the Person/Substantial Owner answered "Yes" to any of the questions above, it is ineligible to enter into a Contract with Cook

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County, but can request a reduction or waiver under Section IV.

IV. Request for Waiver or Reduction

If Person/Substantial Owner answered "Yes" to any of the questions above, it may request a reduction or waiver in accordance with Section 34-179(d), provided that the request for reduction of waiver is made on the basis of one or more of the following actions that have taken place:

There has been a bona fide change in ownership or Control of the ineligible Person or Substantial Owner YES or NO

Disciplinary action has been taken against the individual(s) responsible for the acts giving rise to the violation YES or NO

Remedial action has been taken to prevent a recurrence of the acts giving rise to the disqualification or default YES or NO

Other factors that the Person or Substantial Owner believe are relevant. **YES or NO**

The Person/S	ubstantial Owner must subn	nit documentation to suppo	ort the basis of its re	eguest for a reduction or waiver.	The
	ment Officer reserves the rigi				
	mation Person/Substantial Owner aff	firms that all statements of	ntained in the Affiday	vit are true, accurate and complete	
	ature:	1, 10	¢52	Date: 7-10-15	
Nam	e of Person signing (Print): $\underline{\mathcal{L}}$	galerre O'Donn	4	Title: Presiont	
Subs	cribed and sworn to before n	ne this day o	· Decemi	SN 20 15	
\times A	M QUMM				
	Notary Public Signature			Notary Seal	

Note: The above information is subject to verification prior to the award of the Contract.

"OFFICIAL
KOTTA O'DORGALI
NOTARY PUBLIC, STATE OF ALINOIS
My Commission Economics (A) 27/18

SECTION 5

CONTRACT AND EDS EXECUTION PAGE PLEASE EXECUTE THREE ORIGINAL PAGES OF EDS

The Applicant hereby certifies and warrants that all of the statements, certifications and representations set forth in this EDS are true, complete and correct; that the Applicant is in full compliance and will continue to be in compliance throughout the term of the Contract or County Privilege issued to the Applicant with all the policies and requirements set forth in this EDS; and that all facts and information provided by the Applicant in this EDS are true, complete and correct. The Applicant agrees to inform the Chief Procurement Officer in writing if any of such statements, certifications, representations, facts or information becomes or is found to be untrue, incomplete or incorrect during the term of the Contract or County Privilege.

	Execution by Corporation
PROGRESSIVE INDUSTRIES, IN	Valvie O'Donne / Comme
Corporation's Name	President's Printed Name and Signature
773-763-9566	into progressive pii low
Telephone	Email
Immu &	Email 17-10-15
Secretary Signature	Date
Sostern's Signature	54.5
	Execution by LLC
LC Name	*Member/Manager Printed Name and Signature
	•
Date	Telephone and Email
Exec	cution by Partnership/Joint Venture
Partnership/Joint Venture Name	*Partner/Joint Venturer Printed Name and Signature
Date	Telephone and Email
E	execution by Sole Proprietorship
Printed Name Signature	Assumed Name (if applicable)
Date	Telephone and Email
Subscribed and sworn to before me thisday of	
//7// day of <u>DEC</u> , 20/.>	3 "OFFICIAL SEAL
	My commission expires: Kerra O'Donnel
KOMO (Manne)	NOTARY PUBLIC, STATE OF IL

*If the operating agreement, partnership agreement or governing documents requiring execution by multiple members, managers, partners, or joint venturers, please complete and execute additional Contract and EDS Execution Pages.

Notary Seal